

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the invention entitled:

CANINE MILK SUBSTITUTE (Our Docket IAM 498 PA), described and claimed

 X in the attached specification;
 in the specification filed _____,
as U.S. Application Serial No. _____, and as
amended _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as filed and as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a).

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Richard A. Killworth	Reg. No. 26,397
James F. Gottman	Reg. No. 27,262
Timothy W. Hagan	Reg. No. 29,001
Richard C. Stevens	Reg. No. 28,046
Robert L. Showalter	Reg. No. 33,579
Susan M. Luna	Reg. No. 38,769
James E. Beyer	Reg. No. 39,564
Stephen A. Calogero	Reg. No. 41,491
Charlotte L. Barney	Reg. No. 35,060

Address all telephone calls to (937) 223-2050. Address all correspondence to: KILLWORTH, GOTTMAN, HAGAN & SCHAEFF, L.L.P., One Dayton Centre, One South Main Street, Suite 500, Dayton, Ohio 45402-2023.

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first Inventor: Allan Lepine

Inventor's signature Allan J. Lepine

Date: 9/30/98

Residence: 5451 Hickory Ct.
Lewisburg, Ohio 45338

Citizenship: U.S.A.

Post Office Address: c/o The Iams Company
P.O. Box 189
Lewisburg, Ohio 45338

0916373.093098